

# APPLICATION FOR CERTIFICATION AS SOUTH CAROLINA VOLUNTEER INSTRUCTOR

**RETURN TO:** Hunter & Boater Education Office  
SCDNR  
P.O. Box 167  
Columbia, SC 29202

## PLEASE TYPE OR PRINT

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_  
(Last) (First) (MI)

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_

SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DRIVER'S LICENSE NUMBER \_\_\_\_\_

HOME PHONE NUMBER (including area code) \_\_\_\_\_

OFFICE PHONE NUMBER (including area code) \_\_\_\_\_

MALE \_\_\_\_\_ FEMALE \_\_\_\_\_ RACE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

OCCUPATION \_\_\_\_\_

APPLICANT APPLYING FOR INSTRUCTOR POSITION OF: (check one)

- ☐ Hunter      ☐ Bowhunter      ☐ Trapper  
☐ Boater      ☐ Archery in the Schools      ☐ All of the above

## PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. Have you ever been certified to teach Hunter or Boater Education before? \_\_\_\_\_  
If so, where? \_\_\_\_\_
2. Have you ever been arrested? \_\_\_\_\_ If so, for what offense? \_\_\_\_\_  
What was the disposition of the case? \_\_\_\_\_
3. Education Level Obtained \_\_\_\_\_
4. Are you affiliated with any sportsman group or shooting organization? \_\_\_\_\_  
If so, which ones? \_\_\_\_\_

### **FOR OFFICE USE ONLY:**

Do you feel the applicant's training and/or experience would qualify him?

Officer's recommendation: ( ) Approved ( ) Disapproved

Officer's signature: \_\_\_\_\_ Date: \_\_\_\_\_